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## APPLICANTS

Edward Lynn Triplett, Lexington, KY;  
 Larry Steven Foster, Lexington, KY;  
 David Erwin Rennick, Georgetown, KY;  
 Daniel L. Carter, Georgetown, KY;  
 Richard G. Boyatt III, Lexington, KY;

## \*\* CONTINUING DATA \*\*\*\*\*

*Clear (none)*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*Clear (none)*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/24/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after
Verified and Acknowledged	<i>Anthony J. McARDLE</i> <i>Clear</i> Examiner's Signature Initials
STATE OR COUNTRY	KY
SHEETS DRAWING	3
TOTAL CLAIMS	35
INDEPENDENT CLAIMS	6

## ADDRESS

LEXMARK INTERNATIONAL, INC.  
 ATT: JOHN J. McARDLE, JR.  
 740 WEST NEW CIRCLE ROAD  
 LEXINGTON, KY40550

## TITLE

Integrated media input tray including electronics

FILING FEE RECEIVED 1272	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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